

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE
Sandra B. Moore
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 SEP 15 PM 4:22

DOCUMENT # A24013

1. Name of Limited Partnership

Pitnic Limited

DO NOT WRITE IN THIS SPACE.

2. Mailing Address

P.O. Box 117

Suite, Apt. #, etc.

City & State

Jay, Florida

Zip

32565

Country

U.S.A.

3. Principal Office Address

Highway 4 East

Suite, Apt. #, etc.

P.O. Box 117

City & State

Jay Florida

Zip

32565

Country

U.S.A.

4. Date Formed or Registered
To Do Business in Florida

12/24/86

5. FEI Number

59-2776277

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

\$6.75 Additional Fee required
for a Certificate of Status

7. State or Country of Formation

Florida

8a. Capital Contributions as Shown
on Record

142,936

8b. Amount of Capital Contributions in
FLORIDA to date

142,936

FEES: 1.)

Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent

Thomas B. Henry
P.O. Box 117
Jay, Florida 32565

10. If changed, new registered agent/office

Name John R. Pittman
Street Address (P.O. Box Number is Not Acceptable)
3936 Country Mill Road
Suite, Apt. #, etc.
City Jay FL Zip Code 32565

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

John R. Pittman

DATE

9/10/97

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)

Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

11a. Registration Document Number

Mary Brooks Pittman

P.O. Box 117

Jay, FL 32565

John Riley Pittman

3936 Country Mill Road

Jay, FL 32565

Thomas Brooks Henry

P.O. Box 117

Jay FL 32565

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9999.75 9999.75

REINSTATEMENT

OC 9-15
DCUS

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Mary B. Pittman

DATE

Sept. 10, '97

Typed or Printed Name of General Partner Signing Form

Mary B. Pittman

Telephone Number

850-675-6531

CR2E039 (1/97)